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APPLICANTS

Henry J. Straub, Olathe, KS;
 Bronson D. Hokuf, Olathe, KS;

** CONTINUING DATA ***** *None*
PTN

** FOREIGN APPLICATIONS ***** *None*
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Phyllis G.</i> Examiner's Signature <i>PTN</i> Initials	STATE OR COUNTRY KS	SHEETS DRAWING 8	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 5
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ADDRESS
 Devon A. Rolf
 GARMIN INTERNATIONAL, INC.
 1200 East 151st Street
 Olathe , KS
 66062

TITLE
 Methods, systems, and devices for location specific alerts

FILING FEE RECEIVED 1496	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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